



ಬೆಂಗಳೂರು ನವನಿರ್ಮಾಣ ಪಕ್ಷ BENGALURU NAVANIRMANA PARTY



Correction of Voter Id

Step 1: Open the website - Voter Portal

- Please click on the link given and the website should open like below. Link:
<https://voterportal.eci.gov.in/>

Step 2: Register yourself on the website

- Please use your mobile to register yourself by clicking on the “Create an Account” link

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Step 3: Enter the OTP and finish registration process

- You will receive an OTP, please enter the same to login

Create your Account

Enter 10 Digit Mobile Number

9xxxxxxx93 [Send OTP](#)

Verification Code

Please enter 6 digit verification code sent on your registered mobile number

00:36

[Already have an account? Login here](#)

Step 4: Choosing action (Correction of Voter Id)

- Please choose the action that you want from the toolbar as shown below:

Voter Portal
Election Commission Of India

Home Electoral Search Complaints Track Status Saved Form English Feedback

What are you looking for today ?

[Search in Electoral Roll](#)

New Voter Registration
Apply for new voter ID

Correction in Voter ID
Shifting of residence or Correction of entries or replacement of EPIC or Marking of PWD

Deletion of Voter ID
Objection for proposed inclusion or Deletion of Name in existing

Aadhaar Linkage
Provide Aadhaar number for the purpose of Electoral Roll authentication

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Voter Card Correction- Step 1

- Please click on "Yes, I have a Voter ID" number
- Please enter EPIC number in the text box below and click on Fetch Details; Then click on "Proceed"


**Things you Should Know!**

- ✓ **YES:** It indicates that your name is included in electoral roll and you have Voter ID number
- ✓ **NO:** It indicates that your name is included in electoral roll but you don't have Voter ID number.

Do you already have Voter ID number?



NO, I don't have Voter ID number



YES, I have Voter ID number

Please enter your Voter ID number

Fetch details

Voter Card Correction - Step 2

- You will be shown the details of your previous voter card

Record found		पहचान पत्र क्रमांक/ Voter ID No.	
नाम/Name		माता-पिता/पति/पुरुष का नाम/ Parent/Spouse Name	
लिंग/Gender	M	उम्र/Age	
राज्य/State	Karnataka	विधान सभा निर्वाचन क्षेत्र/ Assembly Constituency	Sarvagnanagar - 160
पहचान पत्र क्रमांक/ EPIC No		संसदीय निर्वाचन क्षेत्र/ Parliamentary Constituency	Bangalore Central
भाग संख्या/Part Number	25	भाग का नाम/Part Name	Grace International English School Room No.1
मतदाता क्रमांक/Serial No	826	मतदान केंद्र/Polling Station	Grace International English School Room No.1

Save & Continue

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Voter Card Correction - Step 3

- Please select the reason for applying for correction


**Things you Should Know!**

✓ Reason for applying formB

Reason for applying for correction*

- ☐ Shifting of Residence
- ☐ Correction of Entries in Existing Electoral Roll
- ☐ Issues of Replacement EPIC without correction
- ☐ Request for marking as Person with Disability

- If you have selected the reason for applying for correction of Entries in Existing Electoral Roll
- Then you will be asked to update your mobile number and an OTP will be sent to your number

**Voter Portal**
Election Commission Of India

You need to update your mobile number
we can help by sending OTP to validate it.
Enter 10 Digit Mobile Number

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Voter Card Correction - Step 4

- Once the OTP is entered you will be able to select the options you want to correct
- You can select Max 4 entry for correction

Things you Should Know!

- ✓ For correction of entries, You are required to select the entries which are to be corrected. You are allowed to make requests for maximum 'three' entries and min 'one' entry for corrections. Others two entries will be displayed on the basis of selected first entry for correction.
- ✓ Copy of self attested document proof in support of claim to be attached i.e. Photograph, Age Proof, Address Proof, Proof for change of name.

Select the entry which is to be corrected

You can select max 4 entry for correction as per the available conditions

You can select max 4 entry for correction

<input checked="" type="checkbox"/> Name	<input type="checkbox"/> Name of relative
<input checked="" type="checkbox"/> Age/Date of Birth	<input type="checkbox"/> Type of relation
<input checked="" type="checkbox"/> Gender	<input type="checkbox"/> Address Correction
<input checked="" type="checkbox"/> Photograph	<input type="checkbox"/> Mobile NO Correction

Save as DraftSave & Continue

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Name:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because i don't have Aadhaar Number

ನಾಮ/Name

ನಾಮ/Name : ಬಿ ವಿ ಲಕ್ಷ್ಮಣ್ / B V Lakshman

Enter the Name*

Enter the Surname

ಪೂರ್ವ ನಾಮ ನಿಶೆ*

ಉತ್ತರ ನಾಮ ನಿಶೆ

Upload document for proof of name*

Choose File No file chosen

Supported formats: jpg, jpeg / max. 2MB

[Back](#) [Save as Draft](#) [Save & Continue](#)

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Age/DOB:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because i don't have Aadhaar Number

ಆಯು/Age

Please select the Correct Age/Date of Birth to update

☒ Age ☐ Date of Birth

Age (as on 1st January of current calendar year)*

YY

Select your age/DOB proof *

Select the document type here

Upload your relevant document*

☒ Upload ☐ DigLocker

Select File to upload

*Supported formats: .png, .jpeg / max: 25MB

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Gender:

Enter the details which need to be corrected/changed

☐

Yes, I have Aadhaar number

☐

I am not able to furnish my Aadhaar Number because i don't have Aadhaar Number

ಲಿಂಗ/Gender

Gender : Female

Please select the correct gender to update*

☐

Male



Female

☐

Third Gender

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Photograph:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

ಫೋಟೋ/Photograph

Please upload your latest picture to update*

*Passport size color photograph (4.5cm X 3.5cm) showing frontal view of full face with white background. Image size should be less than 200 KB and it's acceptable only in format of .jpg/.png

Upload Photograph

[Back](#) [Save as Draft](#) [Save & Continue](#)

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Name of Relative:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because i don't have Aadhaar Number

ರಿಸ್ತೆದಾರ್ ಕಾ ನಾಮ/Name of relative

Enter the name of relative*
Phaneesh Rao

Enter the surname of relative:

ರಿಸ್ತೆದಾರ್ ಕಾ ಅಪನಾಮ ದುರಿತೆ ಕರಿ
ಪುರೇಶ್ ರಾವ್

ರಿಸ್ತೆದಾರ್ ಕಾ ಅಪನಾಮ ದುರಿತೆ ಕರಿ

Type of Relation:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because i don't have Aadhaar Number

ರಿಸ್ತೆದಾರ್ ಕಾ ಪ್ರಕಾರ/Type of relative

Relation Type*

☐ Father ☐ Mother ☐ Husband ☐ Wife

☐ Legal Guardian in case of orphan

☐ Guru in case of Third Gender

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Address Correction:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

ಇಳಿ ಗೃಹ/Address

House No.	House No?	House No- Regional Language?	GO
Street / Area / Locality	Street / Area / Locality?	Street/Area/Locality- Regional Language?	GO
Post Office	Post Office?	Post Office- Regional Language?	GO
Town / Village	Town / Village?	Town / Village- Regional Language?	GO
Taland/Taluk/Mandal	Taland/Taluk/Mandal *	Taland/Taluk/Mandal *	GO
Pin Code	Pin Code*		

Constituency Details

State / ರಾಜ್ಯ	Karnataka
District	Bidhar District
Assembly Constituency	Bidhar Assembly

Select your address proof*

Select the document type from

Upload your relevant document*

Upload

Cancel

Submit for update

Document upload successful. You will receive an SMS.

Mobile No Correction:

Enter the details which need to be corrected/changed

☐ Yes, I have Aadhaar number

☐ I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number

Mobile NO Correction

Changed Mobile No

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Voter Card Correction - Step 5

- Declaration of the details submitted

Declaration

I, , hereby declare that to the best of my knowledge and belief-

- I am a citizen of India
- I am ordinarily resident at the given address
 Flat No - 6, Plot-3, Locality - B.P. Nagar, T, Sorvagnanagar, 550043 B.B.M.P(NORTH), Karnataka

Since* Year Month


- I have not applied for the inclusion of my name in the electoral roll for any other constituency.
- My name has not already been included in the electoral roll for this or any other Assembly/ Parliamentary constituency.

General Declaration

All information given in the application is true and I am aware that making a statement or declaration which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of Representation of the People Act, 1950 (43 of 1950).

Date:* 20-08-2022

Name of the Applicant*



Place* Enter Place*

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Voter Card Migration - Final Step

- You will be now shown a screen with the Form that you have filled.



Form-8
[see rule 13(2) and 26]
ELECTION COMMISSION OF INDIA
Voter Application Form for shifting of Residence/Correction of Entries in Existing Electoral
Roll/Replacement of EPIC/Marking of PwD

FORM No. _____
(To be filled by office)

To,
The Electoral Registration Officer, No. & Name of
Assembly Constituency
Or
No. & Name of Parliamentary Constituency@
(@ only for Union Territories not having Legislative Assembly)

No. 180
Name Savagnanagar
Name _____
No. _____

(i) Name of the applicant: _____

EPIC No. BCW8571937

Aadhaar Details:- (Please tick the appropriate box)
(a) ☒ Aadhaar Number: _____ (or)
(b) ☐ I am not able to furnish my Aadhaar Number because I don't have Aadhaar Number.

Mobile No. of Self (or) _____

Mobile No. of Father/Mother/Any Other relative (if available) _____

Email id of Self (or) _____

Email id of Father/Mother/Any other relative (if available) _____

(ii) I submit application for (Tick any one of the following)
☒ Shifting of Residence (or)

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- Please check the details once and click on Submit if everything is correct

4. Application for Marking Person with Disability

Category of disability (Tick the appropriate box for category of disability)

1. ☐ Locomotive 2. ☐ Visual 3. ☐ Deaf & Dumb

4. ☐ If any other (Give Description)

Percentage of disability: %, Certificate attached (Tick the appropriate box) ☐ Yes ☐ No

DECLARATION

I HEREBY DECLARE that to the best of my knowledge and belief that I am a citizen of India and I am aware that making a statement or declaration which is false and which I know or believe to be false or do not believe to be true, is punishable under Section 31 of Representation of the People Act, 1950 (43 of 1950) with imprisonment for a term which may extend to one year or with fine or with both.

Date: 22/08/2022

Place: Bangalore

Signature of Applicant/Thumb impression

Accessibility Instructions:- In the light of provisions of Right of Persons with Disabilities Act 2016 and Rights of Persons with Disabilities Rule, 2017, in case of persons with intellectual disability, autism, cerebral palsy and multiple disabilities etc., signature or left hand thumb impression of person with disability, or signature or left hand thumb impression of his/her legal guardian will be required.

[Edit Form](#) [Submit](#)

- Post the confirmation, you will be given application 'Reference No' as SMS to the mobile. Please keep this number handy and give it to you BNP volunteer
- You will also receive regular SMS updates of the application being processed confirmation message stating that your application has been processed
- One last step.** Help us to track your application status by filling in this [Google Form](#). We will be happy to assist further.

Together we can make a difference Thank You

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